



EV486244975

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application Serial No.09/928,257
Filing DateAug 10, 2001
Inventor..... Guo et al.
Group Art Unit2671
Examiner NGUYEN, KIMBINH T
Attorney's Docket No. MS1-952US
Title: Macrostructure Modeling with Microstructure Reflectance Slices

RESPONSE TO OFFICE ACTION DATED NOVEMBER 12, 2004

To: MS: Amendments
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

From: Mark Farrell (Tel. 206-315-4001 X106; Fax 509-323-8979)
Customer No.: 22801

In response to the Office Action of May 27, 2004, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 10 of this paper.

Claims 1-50 were previously pending.

Claims 1-7, 27-36, and 45-50 were allowed.

No claims are amendeded.

Applicants request claims 8-26 and 37-44 be canceled without prejudice.

No new claims are added.

Claims 1-7, 27-36, and 45-50 are currently pending.

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PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

Application or Docket Number

09/928257

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	50	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	50 minus 20 =	30
INDEPENDENT CLAIMS	7 minus 3 =	4
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total A	30	Minus	..
Independent	7	Minus	...
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total B	30	Minus	.. 30
Independent	7	Minus	... 7
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	23	Minus	.. 30
Independent	3	Minus	... 7
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

OR OTHER THAN SMALL ENTITY

RATE	FEE	RATE	FEE
BASIC FEE	355.00	BASIC FEE	710.00
X\$ 9=		X\$18=	540
X40=		X80=	320
+135=		+270=	
TOTAL		TOTAL	1570

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
X\$ 9=		X\$18=	
X40=		X80=	
+135=		+270=	
TOTAL ADDIT. FEE		TOTAL ADDIT. FEE	

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